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Bib Data Sheet

CONFIRMATION NO. 4468

<b>SERIAL NUMBER</b> 09/918,323	<b>FILING DATE</b> 07/30/2001 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 2161	<b>ATTORNEY DOCKET NO.</b> Rachis/A
<b>APPLICANTS</b> James S. Katz, Bedford, MA; Christine S. Nevin, Shrewsbury, MA; Raymond Shapiro, Marlboro, MA;				
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/235,496 09/26/2000				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 09/05/2001				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials <i>KA</i>	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 21	<b>TOTAL CLAIMS</b> 18
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> 24390				
<b>TITLE</b> Peripheral device detection and notification				
<b>FILING FEE RECEIVED</b> 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	